

The Women's Vision for the Iraqi Health System

Iraq Ministry of Health

**with the assistance of
Abt Associates Inc. funded by USAID
Contract Number RAN-C-00-03-00010-00
March 16, 2004**

The Women's Vision for the Iraqi Health System

A group of eleven female physicians and nurses were invited to reconsider the "Vision of the Iraqi Health System" from a woman's perspective. Each participant was asked to read the vision again and consider these questions:

1. Does the vision statement adequately cover women's health issues, especially maternal and child health ones?
2. Does the vision statement adequately cover women's issues?

Each participant was also asked to review a questionnaire on the Women's Vision for the Iraqi Health System. This questionnaire will be used by the nine working groups, who developed the Vision of the Iraqi Health System, to insure that women's health issues and women's issues are considered in the vision.

A group of ten physicians and nurses met on March 16, 2004. They reviewed and revised the questionnaire. The group then unanimously approved the document, and endorsed its use by the nine working groups.

Participants:

Dr. Naira Al-Awqati	MOH, Director of Maternal Child Health Section
Dr. Fatin Abdullah	MOH, National Manager for MCH
Dr. Nidal Ibrahim	MOH, National Manager for Breastfeeding
Dr. Rafa Jafar	MOH, Director of Planning Department
Dr. Naugham Muhsin	MOH, Director of Vital Statistics
Dr. Batool	MOH, Director of Training Programs
Dr. Bushra	MOH, Technical Directorate
Dr. Iman	MOH, Technical Directorate
Dr. Nada Alwan	MOH, Cancer Review Board, and Medical City, Breast Cancer Center, and Baghdad Medical College, Professor of Pathology
Farida Sadik	MOH, National Manager for Nursing
Dr. Intessar Abdul Hussein	MOH, Medical Education Department

The Women's Vision for the Iraqi Health System

The Vision for the Iraqi Health System, developed by nine working groups, offers a bright future for a new world. The new system will be centered on the individual person, and will provide each person with access to high quality health care. Women have special health needs. This questionnaire was developed for each working group to insure that the new Iraqi health system considers the specific issues important for women.

1. Will the new Iraqi health system address and meet women's health needs, especially those related to reproductive, maternal and child health?

In many societies, women and children have not gained access to adequate health care. Maternal mortality and infant mortality remain major problems. Women particularly need access to family planning, prenatal care, safe delivery and postnatal care, while children need access to appropriate pediatric care. Access for the early detection, diagnosis and appropriate treatment of cancers, especially breast cancer, is another area for concern. Women also need access to mental health services.

An Office of Women's Affairs in the Ministry would provide a voice for women, and work to insure that the health care system meets women's health needs.

2. Will the new Iraqi health system address and meet women's needs as employees in the health care system?

Some societies do not value women as equal to men. Each society defines roles for women. In some societies, these roles have a narrow range which limits the possibilities in women's lives. The health system must start with equal opportunity for employment, so that women can rise above low visibility, low responsibility and low paying jobs. Women also need equal opportunities for education, especially continuing professional education and fellowships. The health system must also remove barriers to career advancement, so that women do not remain at the bottom of the ladder.

An Office of Women's Affairs in the Ministry would also work to improve the situation of women employees in the health care system.

I. Public Health Working Group	Yes	No
1. Does the new health care system explicitly work toward the goal of reducing maternal and infant mortality?		
2. Does the new health care system have a plan to decrease maternal mortality and infant mortality?		
3. Will the new health care system offer access to education, diagnostic testing and treatment of sexually transmitted disease, especially HIV?		
4. Does the new health care system have a strategy to prevent the transmission of sexually transmitted diseases, especially HIV?		
5. Does the new health care system insure that each woman will have access to family planning services?		
6. Does the new health care system insure that each woman will have access to a trained attendant, a physician or skilled midwife, for a safe delivery?		
7. Does the new health care system insure that each woman will have access to emergency obstetric care with a physician or midwife trained to provide that level of care?		
8. Will the new health care system provide access to appropriate screening and diagnostic testing to improve the early detection of cancers, especially breast cancer?		
9. Does the new health care system have a plan to detect and treat violence against women?		
10. Will each health care facility provide a safe working environment for the staff and patients?		

II. Health Care Delivery Working Group	Yes	No
1. Since women are often under-represented in community leadership roles, will women have a voice to express their needs and priorities in their local health care system?		
2. Due to cultural preferences, will each woman have access to a female health provider trained in family planning in her primary care clinic?		
3. Will each woman have access to education on and counseling for family planning in her primary care clinic?		
4. Will each woman have access to education on and diagnostic testing for sexually transmitted diseases, especially HIV, in her primary clinic?		
5. Due to cultural preferences, will each woman have access to a trained female attendant, a physician or skilled midwife, for a safe delivery?		
6. Will each woman have access to a full range of antenatal and post-natal care, including health promotion, nutritional evaluation, breastfeeding, preventative services, curative services and any needed pharmaceuticals in her primary care clinic?		
7. Will each child have access to a full range of pediatric care, including health promotion, nutritional evaluation, vaccinations, preventative services, curative services and any needed pharmaceuticals in the primary care clinic?		

8. Will each woman have access to early detection, diagnosis and appropriate treatment of breast cancer through her primary care clinic?		
9. Will each woman have access to mental health counseling in her primary care clinic?		
10. Will primary care providers receive special training on the screening and treatment women subjected to violence?		
11. Will physicians in emergency care receive special training on the treatment of rape victims?		

III. Pharmaceuticals, Medical Supplies, and Equipment

Working Group	Yes	No
1. Will Kimadia representatives and MOH women's health representatives work together to insure that the formulary contains those medications consistent with the best practices for women's health, and eliminate any non-effective, non-essential or duplicate drugs from the formulary?		
2. Will pharmacists and physicians in each health care facility have regular meetings and work together on a program to insure the rational use of drugs?		
3. Will each health facility have a system to insure that it has an adequate and available stock of routinely used and necessary drugs, medical supplies?		
4. Will each health facility have an adequate supply of disposable gloves to insure universal precautions?		
5. Will each primary care clinic carry a choice of affordable, effective and culturally acceptable commodities for family planning, such as oral contraceptives, provera injections, IUDs and condoms?		
6. Will each primary care clinic carry sufficient quantities of prenatal vitamins?		
7. Will each delivery room carry the essential drugs recommended by WHO for managing the complications in pregnancy and childbirth?		
8. Will each primary care clinic have a system to carry and appropriately store sufficient quantities of vaccines to prevent childhood and maternal diseases?		
9. Will each primary care clinic carry the appropriate drugs to treat sexually transmitted diseases?		
10. Will each emergency care facility have a PEP (post-exposure prophylaxis) kit for rape victims?		
11. Will each HIV+ person have reasonable access to treatment protocols and appropriate drugs?		
12. Will each women has access to prescription drug treatment for mental illnesses?		

IV. Health Finance Working Group**Yes****No**

1. Does the new health care system guarantee that poor women and children, the most vulnerable members of society, will have access to appropriate health care?		
2. Will women and their children, who are independently certified as poor, have the user fees waived?		
3. Since health care systems often focus resources on the maternal-child population, will unmarried women, widows or women past child bearing age receive equitable access to resources for their health care needs?		

V. Health Information Systems and Information Technology Working Group**Yes****No**

1. Will the database in the health information system have a specialized subset devoted to women's or children's health problems?		
2. Will the database in the health information system be able to generate data on key indicators related to women's health, such as the percentage of deliveries by a trained health care provider?		
3. Will the database in the health information system be able to generate data on key indicator related to children's health, such as vaccination rates?		
4. Will the health information system be able to generate detailed summary reports on women's or children's health?		
5. Will the health care system, from the MOH to primary care clinics, have mechanisms to utilize the information from the key indicators and summary reports to guide health care policy and programs for women's and children's health?		

VI. Human Resources Working Group**Yes****No**

1. Will the Human Resources Section have an Office for Women's Affairs, which plans and provides programs on leadership, management as well as monitoring women's employment and gender issues?		
2. Does the new health care system have a plan to insure equal opportunity for employment based on professional qualifications, and to prevent discrimination based on sex, gender, age, race, ethnicity or religion?		
3. Will women be visible at all levels of the health care system, in numbers fairly equal to those of men?		
4. For working mothers, will the new health care system offer a work schedule with flexible hours?		
5. Will the new health care system insure that men and women with equal professional qualifications and similar jobs are paid equal salaries?		

6. Since men hold most leadership positions in Iraq, does the new health care system have a plan to encourage and insure women an equal opportunity for career advancement?		
7. Will the new health care system establish a policy to prohibit sexual favors and sexual harassment, and provide a means to register and evaluate any complaints?		

VII. Education and Training Working Group

Yes

No

1. Will the medical, nursing and allied health professional schools have a plan to admit and graduate women health professionals in numbers fairly equal to those of men?		
2. Will the curriculum of medical and nursing schools include courses on women's health, as well as women's issues such as gender awareness on social roles?		
3. Will a significant portion of clinical research be devoted to women's health problems?		
4. Will professional women in the health care system have the same opportunities as professional men to improve their knowledge and skills through continuing education, fellowships?		
5. Will each health care employee receive training on women's issues, such as gender awareness on social roles?		
6. Will each health care employee receive safety training on such topics as universal precautions, safe needle disposal and safe ways to clean a blood spill?		
7. Will each health care employee receive training on infection control on such topics as the need for hand washing with soap?		

VIII. Licensing and Credentialing of Health Care Professionals Working Group

Yes

No

1. Will the standards used for credentialing and licensing a health professional be equivalent for men and women?		
2. Will a significant portion of continuing medical and continuing nursing education be devoted to women's health and women's issues?		
3. Will accreditation of each health care facility contain criteria to insure confidentiality and privacy of all health care information?		
4. Will accreditation of each health care facility contain criteria for an environment sensitive to women's needs, such as providing screens for privacy?		
5. Will accreditation of each health care facility contain criteria for a safe working environment?		
6. Will accreditation of each health care facility contain criteria for appropriate infection control?		